D-40 Individual Income Tax Return ** * * DISTRICT OF COLUMBIA GOVERNMENT OFFICIAL USE ONLY OFFICE OF TAX AND REVENUE												
TAXABLE YEAR begining: ending: Date received							A	В		A		В
If this is a final return for a decedent,						uotiona)	С	D)	С		D
enter the date of death here: (See page 2 of instructions YOUR FIRST NAME AND INITIAL LAST NAME						uctions.)	YOUR	SOC. SI	EC. NO.	OCO	CUPATIC)N
ABE	7	SPOUSE'S FIRST NAME AND INITIAL (if joint return) LAST NAME						SPOUSE'S SOC. SEC. NO)N
PLACE LABEL THERE												
		HOME ADDRESS (NUMBER AND STREET)					CITY STATE ZIP CO				CODE	
PART-YEAR RESIDENTS: Period of residency in D.C.: From												\rightarrow
		STATUS	uctions on ming u p	are year recursity raise re	ur residents mast pro				PTIONS			EXEMPTIONS
		ck One)				YOURSELI	-	OLDER	BLIND	DEI	PENDENTS	COL.A COL.B
Α		Single				A 1	+		+	_ +.	=	
В		Head of househ	nold If qualifying personal dependent, enter c	on is a child but not your hild's name here.		B 2	+		+	_ +.		
С		Married filing j	jointly.			C 2	+ H	W	+ HW _	_ +.	=	
D		Married filing separately Spouse's Soc. Sec. No.: D 1 +							+	_	=	
			<u> </u>		COL. A E		+		+	_ + _	=	
Ε		Married filing combined separate col. B					+		+	_ +_	=	
F		Dependent taxp	paver			F 0				ı		
			RELATIONSHII	SOC. SEC. NO.	DEPENDEN		ME I	RELAT	IONSHIP	S	SOC. SE	C. NO.
		Combined separate 1	Filers, use Col. A f	or husband and Col. B i	or wife. Others use	Col. B on	ly	С	OLUMN A	<u> </u>	COL	UMN B
	AE.	-	-	om Line 45, Part I, page 2				1				
	ADJUSTED GROSS INCOME			page 2)			_	2				
•		,		I, page 2)			<u> </u>	4				
RE	GR			3 minus Line 4)				5				
NT(S) HERE	SS	Deduction	=	A), (B), (C) or (F): enter \$1,00				6	 			
ENT(SNOIL	Itemized	` '	ount from Line 61 pg. 2 (Attach				7				
STATEME	DEDUCTI			"O" if you should fill a status				3				<u> </u>
			-	'0" if you checked filing status				0	-			
WITHHOLDING		11. Tax from either tax	x tables □ or income tax	rate schedule 🗆 (Check one)			1	1				
Щ		12. Out-of-State tax of	credit see pg. 5 of instruc	tions (Attach copy of State retu	rn) Indicate State		¬ [,	_				
				hown on Form W-2 as the cred				3				
ATTACH	AND	 Child and dependent care credit (32% of federal credit. Attach Fed. Form 2441, and D.C. Form 2441 if part-year. (a) D.C. low income credit (attach copy of your Form 1040)						(a)				
	TS A	(b) D.C. Metropolitan Police Department housing income tax credit						` /				
ATTACH CHECK OR MONEY ORDER HERE	TAX CREDITS A			14(b)			1.	5				
	CAX (15 is more than Line 11, enter "(py of Form(s) W-2)			1					
	L						_					
		19. Payments submitt	ted with extension of time	to file, (Attach copy of Form F	R-127)		1	9				
				0.10								
				8, 19 and 20, , C, D, or F - If Line 16 is mor e				21	<u> </u>	+		
	AMOUNT YOU OWE OR REFUND	subtract and enter	here.	PAY THIS AM	OUNT WITH RETURN.		2	2	<u> </u>			
				Line 16, subtract and enter here and Line 25			2	3				i
		24. Amount of Line 2	23 to be applied to your 1	999 estimated tax. If joint files	s check here 🗆		2					
		25. Refund amount (1) 26. Status E		Complete this line FOR AMO NET AMOUN	UNT OF NET REFUND . NT YOU OWE			_		26		
	A	27. Filers Only combined separate filers NET REFUND.								27		
										28		
	29. Enter amount of refund or payment due after your contribution (see page 6 of instructions						29					

u Signature of Preparer if other than Taxpayer

Station, P.O. Box 7861, Washington, D.C. 20044-7861, on or before April 15, 1999

Complete your federal income tax return <u>before</u> you prepare your District of Columbia individual income tax return. All taxpayers must complete Part I. Status "E" filers use Columns A and B, all others use Column B. Complete Part II if you had modifications to your federal adjusted gross income. Complete Part III if you itemized deductions on your federal return. Complete Part IV if you had to complete the federal itemized deductions worksheet.

	RT I-INCOME AND ADJUSTMENTS FROM FEDERAL RETURN oplicable, attach copies of Federal Schedule C, D, E, and F.	COLUMN (A) CO		COLUMN (B)		COLUMN (C)			
30.	Wages, salaries, tips, etc								
31.	Taxable interest income								
32.	Dividend income								
33.	Refunds of state and local income taxes								
34.	Alimony received								
35.	Business income or (loss)								
36.	Capital gain or (loss)								
37.	Taxable amount of pensions, annuities and IRA distributions								
38.	Rents, royalties, partnerships, estates, trusts, etc								
39.	Farm income or (loss)								
40.	Unemployment compensation (insurance)								
41.	Taxable portion of social security and tier 1 railroad retirement								
42.	Other income (Specify)								
43.	Total (Add Lines 30 though 42)								
44.	Adjustments to income from federal return								
45.	Federal adjusted gross income, (Line 43 minus Line 44. Enter here and on Line 1, page 1)								
PART II-MODIFICATIONS TO FEDERAL ADJUSTED GROSS INCOME Addition To Income 46. Total additions. Enter here and on Line 2, page 1 (See pg. 3 of instructions)									
Sub	tractions From Income		1						
47.	Interest on U.S. obligations				+				
48.	Refunds of state and local income taxes included on federal return (From Line 33 above)				+				
49.	Income received during period of nonresidence				+				
50.	Social security and tier 1 railroad retirement income from Line 41 above								
51.	Disability income exclusion				+				
52.	Income reported and taxed on D.C franchise or fiduciary return								
53.	Interest and dividend income of child reported on federal Form 8814								
54.	Pension or annuity exclusion								
55.	Other subtractions (Specify)								
56.	Total subtractions (Add Lines 47 through 55. Enter here and on Line 4, page 1) L		ļ						
	RT III-ITEMIZED DEDUCTIONS FROM FEDERAL FORM 1040, SCHEDU	ILE A AND	D.C. ADJ	IUSTI	MENTS				
	u must attach a copy of federal Schedule A to your D.C return)								
57.	Total federal itemized deductions on federal Schedule A								
	Enter all income state or local taxes shown on fed. Sched A, or amt. from line 67, Part IV below								
59.	Deductions attributable to period of nonresidence				+				
60.	Add Lines 58 and 59				_				
61.	Total D.C deduction (Line 57 minus Line 60. Enter here and on Line 7, page 1) L								
PART IV-PERCENTAGE OF STATE AND LOCAL INCOME TAX REDUCTION ADDBACK Part IV is to be completed only if your itemized deductions must be reduced on your federal tax return									
62.	Enter the reduced amount from the federal itemized deductions worksheet								
63.	Total itemized deductions from the worksheet								
64.	Divide Line 62 by Line 63 and enter (percentage)	(%		%				
65.	Amount of state income tax deduction from federal Schedule A								
66.	Multiply Line 65 by the percentage shown on Line 64. This is your D.C state tax addback				\dashv				
67.	Subtract Line 66 from Line 65 and enter the result here and on Line 58, Part III above								
	Under penalties of the law, including criminal penalties for false statements and tax preparer penalties				Taxpayer	s Daytime Telephone			
(-)	\$47-161, et. seq., I declare that I have examined this return and to the best of my knowledge and belie If prepared by a person other than the taxpayer, this declaration is based on all informa				()_	-			
	is propared by a person other than the taxpayer, this decratation is based on all informa-	available	to the prepar	M	Make check or money order payable to				
田			Enter your social security and tax year on your pay-						
IGN HERE	Your Signature Spouse's Signature (If Filing Joint or Combined Separate) Date Date								
Ħ	Spouse's Signature (if Fring Joint of Comoin	ica peparate)	Date	10	ffice of Tax a	nd Revenue. Ben Franklin			

Address

Fed. I.D. No. or S.S. No.